

An Examination of the Football-Related Anxieties Experienced by Amputee Athletes and Their Coping Strategies^{*i}

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ORIGINAL ARTICLE

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Abstract

This study aims to examine the anxieties experienced by amputee athletes in relation to football and the strategies they use to cope with them. The sample consists of eight athletes from a club competing in the Turkish Amputee Football Super League. The research was conducted using a qualitative approach with a phenomenological design. Data were collected through semi-structured interviews carried out on a voluntary basis over three days. Each interview lasted 15–25 minutes, was audio-recorded, and conducted in close interaction with the participants to better capture the phenomenon. The interview questions were developed based on a literature review and the opinions of three experts (a qualitative research specialist, a sports sciences academic, and an amputee football coach). The collected data were analyzed using the content analysis technique. In this process, the interview data were systematically examined, coded, and grouped into themes. Based on the participants' statements, codes such as disability, stump, lack of information, pessimism, and shame were grouped under the themes of health, guidance, and emotional. The strategies used by football players to cope with anxieties—learning by doing, coach support, peer support, and family support—were categorized under the themes of experience and motivation. As a result, it was observed that amputee athletes were not fully aware of the difficulties they might encounter before taking the field, experienced shyness, and felt concerned about whether they could succeed. After starting to play football, it was determined that their worries regarding shame, injury, and potential harm to the stump continued.

Keywords: Amputee Football, Anxiety, Coping Strategies.

Ampute Sporcuların Futbola İlişkin Yaşadıkları Kaygıların İncelenmesi ve Başa Çıkma Stratejileri

Öz

Bu çalışma, ampute sporcuların futbola ilişkin yaşadıkları kaygıları ve bu kaygılarla başa çıkmak için kullandıkları stratejileri incelemeyi amaçlamaktadır. Örneklem, Türkiye Ampute Futbol Süper Ligi'nde yer alan bir kulüpte oynayan sekiz sporcudan oluşmaktadır. Araştırma, nitel yaklaşım ve fenomenoloji deseni ile yürütülmüştür. Veriler, gönüllülük esasına dayalı olarak üç gün boyunca gerçekleştirilen yarı yapılandırılmış görüşmeler yoluyla toplanmıştır. Her bir görüşme 15–25 dakika sürmüş, ses kayıt cihazı ile kaydedilmiş ve olguyu daha iyi anlamak amacıyla katılımcılarla yakın etkileşim içerisinde yürütülmüştür. Görüşme soruları, alan yazın taraması ve üç uzmanın (nitel araştırma uzmanı, spor bilimleri akademisyeni ve ampute futbol antrenörü) görüşleri doğrultusunda hazırlanmıştır. Toplanan veriler içerik analizi tekniği kullanılarak incelenmiştir. Bu süreçte görüşme verileri sistematik bir şekilde analiz edilmiş, kodlanmış ve temalar altında gruplandırılmıştır. Katılımcı ifadelerine dayanarak engellilik, stump, bilgi eksikliği, karamsarlık ve utanç gibi kodlar sağlık, rehberlik ve duygusal temalar altında toplanmıştır. Futbolcuların kaygılarla başa çıkmak için kullandıkları öğrenerek deneyim kazanma, antrenör desteği, akran desteği ve aile desteği gibi stratejiler ise deneyim ve motivasyon temaları altında kategorize edilmiştir. Sonuç olarak, ampute sporcuların sahaya çıkmadan önce karşılaşılabilecekleri zorlukların tam olarak farkında olmadıkları, çekingenlik yaşadıkları ve başarılı olup olamayacaklarına dair kaygı taşıdıkları gözlemlenmiştir. Futbola başladıktan sonra ise utanç, sakatlanma ve stump bölgesine zarar gelmesiyle ilgili endişelerinin devam ettiği belirlenmiştir.

Anahtar kelimeler: Ampute Futbolu, Kaygı, Başa Çıkma Stratejileri.

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Introduction

Sport is not limited to physical performance alone; it is a multidimensional phenomenon that must also be examined through its psychological, social, and emotional dimensions. In the specific context of football, alongside physical preparation, mental resilience and anxiety management play a critical role in determining on-field success. Particularly for athletes with disabilities, sport is closely associated not only with physical development but also with the process of social acceptance, and the anxieties experienced in this context tend to be more complex in nature. Football is recognized as a sport that requires not only physical prowess but also strong mental fortitude. Especially in the periods leading up to and during competitions, athletes often encounter varying intensities of anxiety. This condition can be particularly pronounced and complex among athletes with physical disabilities (Parnabas, Parnabas & Parnabas, 2015). In this regard, amputee football players must cope with more than just physical challenges; they also face various psychological issues such as difficulties in gaining social acceptance, diminished self-worth, insufficient social support, and concerns about potential re-injury (Wieczorek et al., 2017).

Scholars have shown sustained interest in understanding how anxiety affects athletic performance. Anxiety is generally categorized into two distinct types: cognitive, which involves mental processes, and somatic, which pertains to physical symptoms (Parnabas & Mahamood, 2013). While cognitive anxiety may involve internal conflicts like self-doubt, fear of errors, or social pressure, somatic anxiety presents through physiological responses such as an elevated heart rate or gastrointestinal discomfort (Romanyuk, 2024).

Even though research findings on the relationship between anxiety and performance have not been entirely consistent, a prevailing pattern suggests that heightened anxiety levels can hinder athletic performance—this is particularly evident among athletes with limited experience (Parnabas, Parnabas & Parnabas, 2015). Conversely, athletes who perform at elite levels typically demonstrate greater capability in regulating both types of anxiety, thereby enhancing their overall performance outcomes (Karim et al., 2019). The low anxiety levels observed in this group are associated with higher self-confidence and the ability to make sound decisions under pressure (Parnabas, Parnabas & Parnabas, 2015).

On the other hand, among lower-level or amateur athletes, the negative impact of cognitive anxiety on performance becomes more pronounced (Kaba, 2017). Especially younger or less experienced players may experience heightened anxiety in competitive settings, which can lead to slower decision-making, an increased tendency to make errors, and reduced concentration (Mouloud, 2019).

In qualitative research, various theoretical frameworks are employed to make sense of anxiety and coping processes. For instance, Lazarus and Folkman's stress and coping theory emphasizes that individuals' evaluations of a situation as either a 'threat' or a 'challenge' directly influence their level of anxiety (Lazarus & Folkman, 1984). Similarly, Bandura's self-efficacy theory highlights that athletes' beliefs in their own abilities enhance their capacity to cope with anxiety (Bandura, 1997). In addition, social support theory suggests that the emotional and structural support received from one's environment serves as a protective factor in anxiety management (Cohen & Wills, 1985). These theories are particularly useful for understanding the multidimensional nature of anxiety experiences among amputee football players and for interpreting qualitative findings in greater depth.

A wide range of strategies aimed at managing anxiety have been thoroughly explored in academic studies. Methods including positive internal dialogue, controlled breathing, relaxation techniques, mental imagery, goal formulation, regulation of thoughts, and maintaining concentration have all been identified as useful in lowering anxiety and improving athletic outcomes (Parnabas, Parnabas & Parnabas, 2015). Moreover, structured psychological intervention programs such as the "Athlete Mindset Program" have been found to decrease both injury-related anxiety and general performance anxiety in athletes (Akın et al., 2024). Similarly, the strength of social support systems—including coaches, teammates, and family—plays a protective role in athletes' coping processes (Köyağasıoğlu & Şenışık, 2023).

However, a noteworthy point is that most of these findings predominantly focus on either non-disabled amateur athletes or professional amputee athletes. Yet, specific groups such as amputee football players face multilayered stressors including body image issues, social interaction difficulties, low self-confidence, and physical limitations; these factors lead to differentiated anxiety levels and distinct coping mechanisms (Darisman et al., 2024; Wiczorek et al., 2017). The need for more in-depth examination of this particular group within the context of sport psychology is clearly evident in the existing literature.

In this context, the present study aimed to explore the types of anxieties experienced by amputee athletes throughout their football journey and to identify the strategies they employ to cope with these challenges. Accordingly, the main research questions of the study are as follows:

What types of anxiety do amputee football players experience before starting football and during their first appearances on the field?

What methods and strategies do amputee football players use to cope with the anxieties they encounter?

Materials and Methods

This study was designed using a qualitative research approach to examine the types of anxiety experienced by amputee athletes during the initial stages of their participation in amputee football. Qualitative research does not primarily seek statistical generalization; rather, it aims to provide an in-depth understanding of complex phenomena that cannot be adequately explained through numerical data, focusing on individuals' lived experiences (Kurtuluş, 2011; Creswell, 2013). Creswell (2013) notes that qualitative inquiry is particularly effective in uncovering participants' subjective meanings, while Patton (2015) emphasizes its flexibility in addressing contextual and process-oriented aspects of human behavior. Within this approach, data are commonly collected and analyzed from sources such as interviews, observations, texts, and visual materials.

Model of the Research

This study was carried out using the phenomenology design, one of the qualitative research approaches. Phenomenology aims to explore in depth the phenomena directly experienced by individuals and to reveal the meanings they attribute to these experiences (Creswell, 2017).

Population and Sample / Study Group

The population of this study consists of all amputee athletes playing in the 2023–2024 season of the Turkish Physically Disabled Sports Federation (TBESF) Amputee Football Super League. The sample group comprises eight amputee football players from a club based in the province of Şanlıurfa. This club was selected to ensure that the sample would be representative of the larger population.

The study group was determined using purposive sampling, a technique specific to qualitative research. In purposive sampling, participants with relevant experience aligned with the research objectives are intentionally selected. A preliminary meeting was held with the technical director of the sports club, during which detailed information about the study was provided. The sample included a total of eight licensed amputee football players who were active during the 2023–2024 season—four of whom were congenitally amputated and four who had undergone amputation later in life. The interviews were concluded once data saturation was deemed to have been reached for this group. Table 1 below presents the personal information of the amputee football players who participated in the interviews. In order to protect the anonymity of the participants, pseudonyms were used; the names listed in the table do not reflect the athletes' real identities.

Table 1

Personal Characteristics of the Participants

Pseudonym	Type of Amputation	Gender	Age	Playing Experience
Kadir	Congenital	Male	18	7 Years

Cemal	Acquired	Male	29	14 Years
Eymen	Acquired	Male	29	7 Years
Emre	Congenital	Male	19	8 Years
Yakup	Congenital	Male	18	5 Years
İbrahim	Acquired	Male	21	7 Years
Çınar	Congenital	Male	20	8 Years
Süleyman	Acquired	Male	32	9 Years

Data Collection Tools

The data required for this study were obtained through interviews. In qualitative research, interviews serve as a primary data collection tool that enables an in-depth understanding of participants' emotions, thoughts, and experiences. This method not only captures what participants express verbally but also aids in interpreting what remains unspoken or is difficult to articulate, thereby allowing the researcher to convey the contextual depth of the participants' realities (Patton, 2014).

To collect data, a semi-structured interview technique was utilized, and an interview form comprising eight open-ended questions was specifically designed for amputee football players. During the development phase, an extensive literature review was conducted, followed by consultations with experts, including a qualitative research specialist, a sport sciences academic, and a coach of an amputee football team. Based on their feedback, necessary adjustments were made, resulting in the finalized version of the interview form.

Data Collection Process

Individual semi-structured interviews with eight amputee football players were conducted in a designated room at the club facilities to ensure a quiet and confidential setting. Participation was entirely voluntary, and informed consent was obtained from all participants before the data collection began. The interviews lasted between 15 and 25 minutes, were completed within three days, and were audio-recorded with the participants' approval. Observation notes were also taken to enhance the accuracy and depth of the data.

Analysis of Data

The audio recordings obtained from the interviews were transcribed verbatim, and observation notes were added prior to the data analysis process. In line with Creswell's (2017) recommendations, a neutral stance was maintained throughout, and care was taken to present both the positive and negative aspects of the findings. The analysis was carried out using the content analysis technique. Content analysis is defined as a systematic and replicable method in which specific segments of text are coded according to predetermined rules and words are grouped into smaller content categories

(Büyüköztürk, 2016). In this study, the coding process was conducted manually by the researchers. The interview transcripts were read repeatedly, meaningful statements were identified, codes were created, and these codes were then grouped into broader categories and transformed into themes. Given the manageable size of the dataset and the researchers' careful checks, manual coding was considered sufficient and reliable.

Ethics of Research

This study was approved by the Ethics Committee for Social and Human Sciences at Harran University under protocol number 2024/122, dated April 16, 2024. All procedures were conducted in accordance with the "Directive on Scientific Research and Publication Ethics of Higher Education Institutions."

Findings

The research findings are presented in two main sections: (1) the anxieties experienced by amputee athletes in relation to football, and (2) the strategies employed to cope with these anxieties. Initially, the various anxieties reported by amputee football players were treated as individual co-des. These codes were then clustered into coherent and meaningful themes.

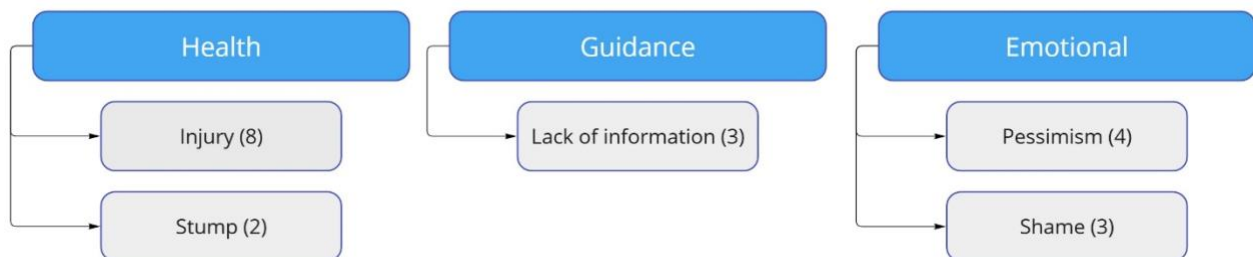


Figure 1. Code and Theme Frequencies Related to the Anxieties Experienced by Amputee Athletes in Football

As shown in Figure 1, the findings regarding the anxieties experienced by amputee athletes in relation to football were categorized into the following codes: injury, stump, lack of information, pessimism, and shame. These codes were grouped under three overarching themes: health, guidance, and emotional.

Participants expressed concerns such as: “What if something happens?”, “What if I fall and break my arm or leg?”, “What if someone hits my prosthetic limb?”, “What if we collide?”, “Could my stump get injured?” indicating the types of anxieties they experienced in football contexts.

As part of the health theme, all participants emphasized that they experienced injury-related anxiety at the beginning of their football careers. For instance;

Çınar, who plays as a goalkeeper, described his concerns as follows;

"I could dive easily to my stronger side, but I couldn't dive in the air—I was afraid of jumping in the air. When I did, I would ask myself: what if I break my hand? What if something happens to my hand? What should I do if the ball comes too hard? I had those kinds of fears."

Similarly, Yakup expressed his anxiety by stating;

"Yes, many times—I was afraid of my amputated leg. I kept thinking: what if the crutches hit it? What could I do if I fell on the crutches? And I actually did fall once. The first time I fell, I was really scared. I wondered: did something happen? Did I bruise myself? Was there a problem?"

Kadir, who was born with a limb difference, shared;

"...I was certain that if I fell, I would break something."

İbrahim, who became an amputee later in life, added;

"Yes, I did feel it. For example, when the ball was coming toward me, I'd worry whether I could control it without falling. I was scared at times—could I kick the ball? While running, I constantly had the fear of falling on my stump. I was always hesitant. Would someone bump into me? Would the crutches hit me? In the beginning, those were my constant fears."

Süleyman, another participant who was amputated later in life, stated;

"Slipping, yes, especially because it's dangerous—falling on the crutches is very risky. After all, you're on one leg. You try to maintain your balance and also intervene with the ball. You always face the risk of falling. In fact, once during a penalty kick, I fell and fractured my arm."

Analysis revealed that concerns regarding the stump were present in one-quarter of the participants—all of whom were amputated later in life.

Süleyman remarked;

"Even a small scratch on the stump could mean you won't be able to wear the prosthesis for a week. It's all about the fear of falling on the field and trying to protect it. Like I said, I have an active life—you're going to a match, but even a light scratch

could prevent you from wearing the prosthesis for a week because healing inside the silicone takes longer. I once had surgery due to an ingrown hair and couldn't use my prosthesis for a month. That's why I always clean it extra carefully when I get home—to avoid infection. You're forced to give it special attention."

İbrahim also commented on this concern;

"There's always a fear of the stump getting hurt. I fear the ball might hit it, because when it does, the pain is intense—really intense."

Within the scope of the guidance theme, participants coded as Kadir, İbrahim, and Yakup expressed anxiety stemming from a lack of information and uncertainty about what kind of environment they would encounter when stepping onto the field for the first time.

For instance, Çınar shared;

"My brother was the one who took me to the field for the first time, to the 11 Nisan Stadium. As I mentioned, I didn't even know I would be a goalkeeper until I stepped onto the field."

İbrahim explained his uncertainty by stating;

"The only thing that scared me was that I didn't know what I was going to do when I first stepped onto the field. I had no idea."

Similarly, Yakup noted;

"You don't know what to do. I didn't even touch the ball during my first training session."

Within the scope of the emotional theme, participants coded as Kadir, İbrahim, Yakup, Süleyman, and Çınar expressed feelings of shame and social anxiety, particularly about being seen as amputees. These concerns often led to hesitation and withdrawal.

Kadir reflected on his initial experience by saying;

"It was really hard for me. The first time I came, I just couldn't do it—I even left the field that day because of fear."

İbrahim added;

"Can I dribble the ball? Can I shoot? Can I even walk or run on the field? You feel a lot of excitement, but also a lot of fear..."

Yakup described his experience as;

“There was embarrassment and excitement. I was shy, and even the way I spoke was affected—it was shaky.”

Süleyman shared a deeper reflection about being seen differently;

“After wearing the prosthesis for 4-5 months, you start to feel like a normal person. But once you step onto the field, suddenly everyone is looking at you again. You become ‘the disabled guy.’ Normally, when you’re wearing a prosthesis, people can’t even tell—you look like anyone else. But on the field, spectators and people from outside see you for what you are: visibly missing a leg. That really affects you.”

İbrahim elaborated on the emotional toll of social exposure;

“There’s also the fear of going outside. When I first became an amputee, I was scared—would people see me? Would I feel ashamed? Would I be uncomfortable? That fear was always there.”

Within the scope of the pessimism code, three participants expressed feelings of self-doubt and pessimism about whether they could succeed in football.

Yakup stated;

“At that moment, I was filled with questions: Can I play? Can I participate in matches? Can I ever make it to the national team? It wasn’t exactly fear—it was more of a pessimism, that’s how I’d describe it.”

Kadir echoed a similar sentiment;

“I was excited when I first learned about it, but I immediately thought, ‘I won’t be able to do this.’ The first time I came, I just felt like I couldn’t.”

İbrahim described the emotional conflict he faced;

“It’s such a strange feeling—you keep asking yourself, ‘Can I really do this?’ There’s this involuntary hesitation, this anxiety.”

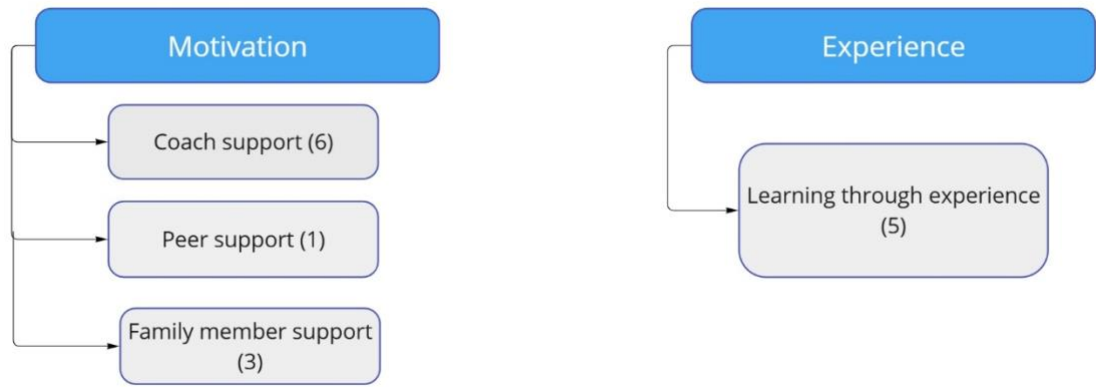


Figure 2. Code and Theme Frequencies Related to the Coping Strategies Used by Amputee Athletes for Football-Related Anxiety

As presented in Figure 2, the strategies used by amputee athletes to cope with football-related anxiety were categorized into the following codes: *learning through experience*, *coach support*, *peer support*, and *family member support*. These codes were then grouped under two overarching themes: *experience* and *motivation*.

Within the scope of the motivation theme, all participants stated that they were able to cope with their anxieties through the support and assistance of others. For instance,

Eymen shared how peer encouragement played a role in reducing his fears;

“My friends motivated me. They told me, ‘Don’t be afraid—you’re our friend, our brother. Nothing will happen, just play comfortably.’ Eventually, I got used to it.”

Emre emphasized the emotional comfort he received from family presence;

“When I looked over at the bench and saw my father or brother there, I felt relieved. It made me think: ‘There’s someone I know here, and if something happens, my dad is here.’ That removed a lot of the anxiety.”

Kadir expressed the joint support of his family and coaches;

“I had my mother and father, thank God—they always had my back. And our coaches were behind me too. They believed in me. They used to say, ‘You can do this—you’ll succeed.’ And I believed in myself. That’s how I overcame it.”

Süleyman described the instrumental role of his older brother;

“It was mostly my older brother. We were living alone together in Ankara—our parents were back in the village. He was a huge support, not only emotionally but also when it came to the prosthesis. He really stood by me.”

Cemal humorously recalled a moment that helped normalize his fears; (*Pointing to his amputated knee*)

“This happened when I fell—but it was nothing serious. Our coach said, ‘It’s fine—no big deal. Get up, go on!’ (laughs)”

İbrahim reflected on the empathetic support he received;

“Our coaches helped us a lot. Naturally, you’re newly amputated, so their attitude was different. Also, the support from family and relatives made a difference.”

Yakup emphasized the direct role of his coaches;

“Yes, I trained using crutches. My older teammates and my coaches really supported me—they never withheld their help. Coach 1, Coach 2, Coach 3, and the team captain were all very supportive. I did extra training. My coaches worked with me one-on-one.”

These statements clearly demonstrate that external sources of motivation, particularly support from coaches, peers, and family members, played a significant role in helping participants cope with their football-related anxieties.

Within the scope of the experience theme, participants coded as Kadir, Cemal, Yakup, Çınar, and Süleyman indicated that they overcame their anxieties primarily through hands-on experience—by training consistently, falling during practice, and realizing that such incidents did not result in serious harm. This gradual exposure helped them build confidence and reduce fear over time. For example,

Kadir shared;

“I just kept training. The more I practiced, the more confident I became in myself.”

Cemal reflected similarly;

“You fall today and get back up—nothing happens. Then you fall again tomorrow, and again, nothing happens. After a while, it just becomes normal.”

Süleyman described how his physical adaptation led to increased confidence;

“As I said, you’re holding something you’re unfamiliar with and trying to kick the ball at the same time. But after using it for a while, your arms get stronger. At some point, it starts to feel like a natural extension of your body—almost like your real hand.”

Yakup emphasized his dedication and extra effort to overcome physical limitations;

“For six months, my hands were weak—I didn’t have fine motor control in my right fingers. Now I can use them. While the team trained twice a week, I did double sessions on those two days, and trained every single day for six days a week—just so I could play and improve.”

Çınar shared his experience of desensitization through repetition;

“I had a cut above my eyebrow once, but I got through it. I got used to the physical contact, to the hits, and then I overcame it.”

These insights illustrate that repeated physical engagement and learning through direct experience were crucial in helping participants manage and ultimately overcome their initial fears and performance-related anxieties.

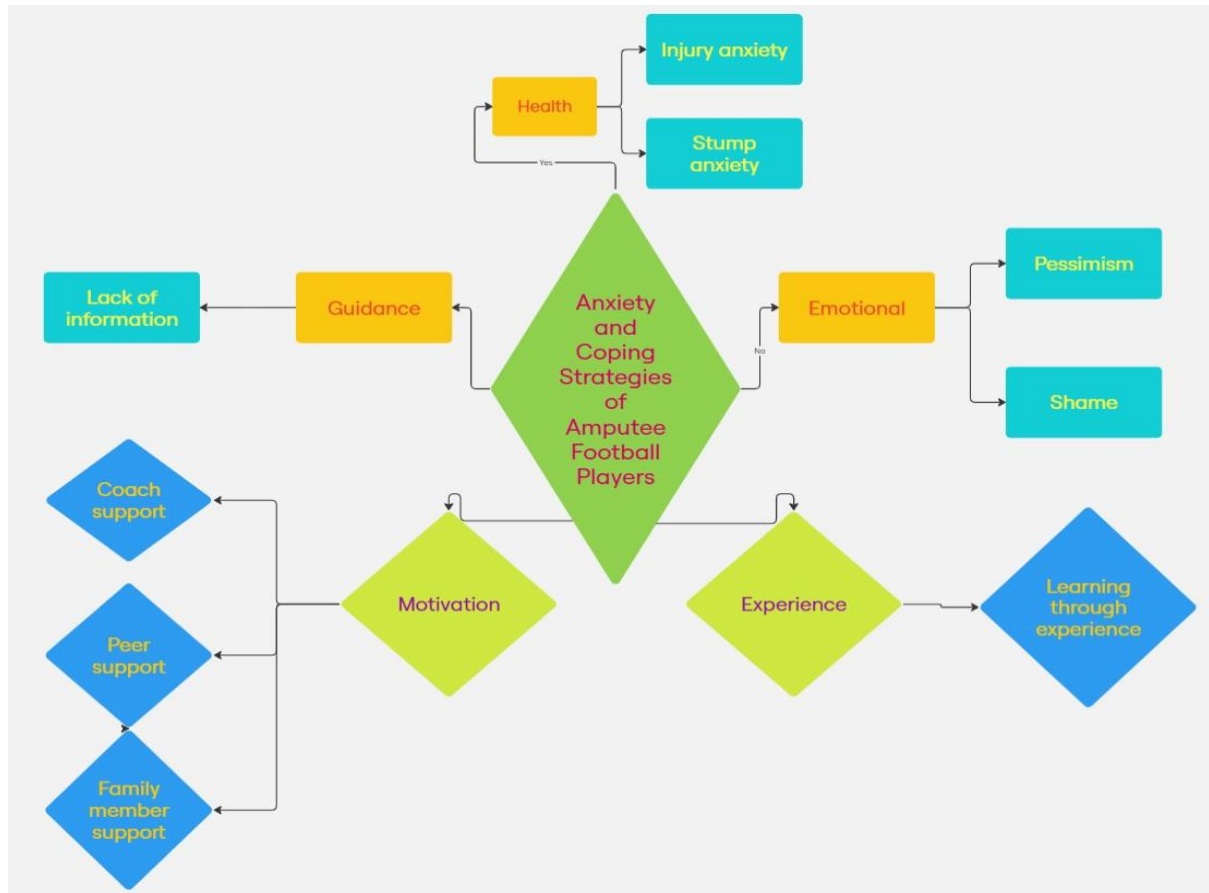


Figure 3. Illustrates the football-related anxieties experienced by amputee athletes and the coping strategies they employed.



Figure 4. Word cloud representation of the football-related anxieties experienced by amputee athletes and the coping strategies employed

Discussion

Anxieties Experienced by Football Players

It was observed that all amputee football players participating in the study experienced a noticeable level of injury-related anxiety at the beginning of their football careers. The fact that these individuals live with only one functional leg, and that a potential injury to their intact limb could significantly disrupt their daily lives, stands out as one of the primary factors contributing to heightened anxiety levels. Cömert and İlhan (2024) also noted that individuals with amputations may experience higher levels of anxiety compared to non-disabled individuals.

Among the participants in the current study, three had started playing football after the age of 18, while five began before the age of 18. Regardless of age, all participants reported experiencing injury-related anxiety during their initial involvement in the sport.

Previous research has sought to explain how injury-related anxiety correlates with various individual factors. For example, Ünver et al. (2020), in their study with university athletes, found that the fear of pain was not significantly associated with age. Conversely, Budak et al. (2020) reported that as athletes' years of participation increased, so did their fear of re-injury. However, Karabulut et al. (2019) found no significant relationship between years of sporting experience and levels of anxiety. In the present study, a general trend emerged indicating that injury-related anxiety decreased as years of experience increased. Nevertheless, half of the participants who had become amputees later in life continued to experience persistent anxiety. This appears to be primarily due to the functional dependence on prosthetic limbs in daily life; if the stump area—where the prosthesis is attached—were to be injured, the individual would be unable to use the prosthesis, leading to both physical limitations and heightened anxiety.

Similarly, findings in the literature regarding the physical risk factors faced by amputee football players are noteworthy. Yalçınkaya et al. (2020) reported that amputee athletes are frequently exposed to injuries caused by excessive strain, falls, or physical impacts during training and competitive matches. Akkaya et al. (2011) emphasized that injuries in amputee football are more commonly observed in the lower extremities compared to the upper extremities. This is primarily attributed to the structural characteristics of the playing surface and the intense physical exertion involved in the sport. Weiler et al. (2016) further demonstrated that discrepancies in leg length can

negatively affect running performance and increase the risk of injury. In addition, various studies have highlighted the frequency and types of injuries among amputee football players. Gülaçtı (2010) found that a significant proportion of injuries (64.3%) occurred during matches.

Beyond the physical aspects, the psychological consequences of amputation must also be considered. Anderson (2015), in his study involving soldiers who became amputees during combat, suggested that post-amputation bodily changes could be linked to repressed trauma in some individuals, potentially giving rise to psychological defense mechanisms such as the "guarded stump." Moreover, Uygunkara (2019) found that societal prejudices suggesting that individuals with disabilities are incapable of participating in sports are reinforced by the constant reminder of their physical limitations, leading to adverse psychological effects. Our findings align with the literature, showing that amputee players' anxiety—especially about injury and stump damage—has both physical and psychological dimensions.

The results indicated that 37.5% of the participants experienced anxiety due to a lack of information during the early stages of their football involvement. Participants reported that they lacked sufficient knowledge about the environment they would encounter on the field and were unsure of what to do when they first participated. Therefore, the absence of information appears to be not only a technical issue but also a key factor affecting psychological readiness. In fact, Emir (2012) identified lack of facilities, time constraints, and insufficient information as major barriers to participation in leisure activities.

Similarly, Sarıgöz et al. (2017), in their evaluation of barriers to leisure participation among amputee individuals with sports training backgrounds, ranked lack of information, limited facilities, insufficient peer support, and time constraints as the most significant obstacles—placing less emphasis on individual psychology or disinterest. In another study, Akyürek et al. (2013) found that amputee individuals often perceive environmental conditions as a major barrier to engaging in leisure-time activities. In this context, the findings of the present study align with the existing literature, underlining the impact of informational deficiencies on sports participation.

The current findings also reveal that some participants experienced pessimism and shame-based anxieties at the onset of their football journeys. Internalized questions such as “Can I do this?”, “Can I dribble the ball?”, “Can I kick it?” emerged as clear indicators of low self-confidence and social withdrawal. Among individuals with disabilities, commonly held beliefs such as “I can’t” or “If I make a mistake, I’ll be judged” often hinder social participation, making it more difficult for them to go out into the community and engage in social interaction. Similar patterns have been widely documented in the literature. For instance, Altun (2010) reported that individuals with physical

impairments preferred to engage in sports activities with other individuals with disabilities (58%), largely due to the desire to compete under equal conditions.

Moreover, the attitudes of non-disabled individuals can influence the motivation of individuals with disabilities to engage in sports. Negative social perceptions may give rise to feelings of shame or withdrawal. Socio-cultural representations also reinforce such perceptions. Mengi (2019) highlighted that elementary school textbooks often depict individuals with disabilities as helpless and incapable of independent action, subtly conveying messages about their perceived lack of societal competence. Similarly, Buz and Karabulut (2015) found that women with disabilities possess a strong perception of being subjected to discrimination in both educational and professional settings.

From a psychological perspective, limb loss appears to trigger a form of grief process in the individual. Uygunkara (2019) noted that events like loss, separation, or amputation evoke natural grief responses. Similarly, Bildik (2013), based on personal accounts, interpreted the experience of limb loss as a symbolic form of death and defined the grieving process as "learning to live without a limb." According to Bildik's four-stage grief model, many participants in this study who experienced amputation later in life appeared to reach the final stage—"reorganizing relationships and continuing with life" through their involvement in amputee football. In this context, the findings of the current study show a strong parallel with the existing body of literature. Additionally, Frere (2007) emphasized that participation in football plays a crucial role in both physical rehabilitation and psychosocial recovery among amputees. Consistent with this, the present study highlights that amputee football functions as a powerful tool in helping individuals re-establish their connection to life.

Coping Strategies of Football Players

Amputee football is a unique sport in which individuals with disabilities overcome both physical and psychological limitations to actively participate in sport, with motivation playing a pivotal role in the process. Beyond fostering personal development, this form of sport serves as a vital instrument for facilitating the social integration of individuals with disabilities. According to the study findings, support from coaches, family members, and peers constitutes the primary sources of motivation in the athletes' coping processes. Indeed, the decision of individuals with disabilities to initiate and sustain sports participation is largely influenced by environmental support factors.

The literature often highlights that motivation levels can differ depending on variables such as the nature of the disability, gender, and individuals' previous experience in sports. Therefore, understanding the motivational dynamics of individuals with disabilities is of utmost importance for coaches, physical education teachers, and family members. This is especially relevant due to the

physical, psychological, and social benefits of sports for individuals with disabilities (Demir & İlhan, 2020).

Moreover, Özsoy and Okyayuz (2016), in their study on individuals who had undergone amputation, reported that continuous support from family members contributed significantly to the participants' emotional well-being, with many identifying their families as their primary source of support. Similarly, Orhan et al. (2023) emphasized the pivotal role of parental attitudes in the development of young athletes, noting that such attitudes are often reflected in sports-related behaviors. This is because the personality development of children and adolescents is shaped through the interaction of multiple factors, including heredity, parental attitudes, social environment, and peer relationships.

In our study, 37.5% of participants stated that family support was a key factor in helping them cope with the anxieties they experienced. Previous research has also highlighted that not only the actual presence of social support but even the perceived support can positively influence psychological relief (Özkan, 2010). In addition, the findings revealed that 75% of participants identified coach support as a decisive element in reducing their anxiety levels. These results strongly suggest that social support mechanisms serve as critical protective factors in anxiety management for amputee athletes, aligning closely with the broader literature on the subject.

Conclusion and Recommendations

Interview and observation data revealed that amputee athletes, at the beginning of their football journey, experienced uncertainty about what to expect before entering the field, exhibited signs of social withdrawal, and questioned their own competence (e.g., "Can I do this?"). Furthermore, once they began playing, participants reported experiencing anxiety related to shame, injury, and potential damage to the stump. Most participants managed their anxieties through on-field experience and support from family, friends, and coaches.

The findings of this study demonstrate that the anxieties experienced by amputee football players are not limited to individual concerns but also encompass social and environmental dimensions. In particular, injury- and stump-related anxieties influence athletes' daily practices, creating psychological pressure that extends beyond physical limitations. At the same time, social support mechanisms—such as encouragement from family, coaches, and peers—were identified as strong protective factors in reducing anxiety. Accordingly, amputee football can be regarded not only as a sporting activity but also as a significant tool that promotes social integration and psychological recovery among individuals with disabilities.

Suggestions

- Pre-season informational sessions should be organized for individuals preparing to start amputee football, in order to reduce initial anxiety and uncertainty.
- Having family or close friends present during an athlete's first game can greatly reduce anxiety..
- Sports facilities should be built or adapted in accordance with amputee football rules and designed to meet the basic accessibility needs of individuals with disabilities.
- Awareness seminars should be held for families of amputee athletes to address and reduce their own concerns and improve their understanding of the sport.
- Future research should explore similar themes in other amputee sports branches, allowing for a broader evaluation of findings and comparisons across disciplines.

Ethical Approval Information

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Author Contribution Statement

Both authors contributed equally to all stages of the study.

Conflict of Interest Statement

The authors declare that there is no conflict of interest related to this research.

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